Foster	Family	Home	- Cori	rective	Action	Report

Provider ID:	1-160084	Man Aging and	A LANGE AND REPORTED		таков институтив <del>от 164 горого досода из на</del>	emperatoritum enterprise antipulis menementerine mis den sambitus memmes tale ta attante dan den den
Home Name:	Hazeline	Taban	, CNA	Review ID:	1-160084-1	katinak histi historikat (kashasaini histiri dain masinarakan, mat. hazan, an ahtaban sasangingan Etmatikata nasanranakan
94-917 Kuhaulu	a St., B			Reviewer:		, ,
Waipahu		н	96797	Begin Date:	11/30/2016	End Date: Wally 116
Foster Family	Home	Re	quired Cert	ificate	[17	7-1454-6] &
6.(d)(1) Comment:	Comply	with a	ll applicable re	equirements in this cha	apter, and	•••••••••••••••••••••••••••••••••••••••
6.d.1 Home vis	sit made for	CTA b	v 12/30/16.			Report issued during home visit with a written
Foster Family	Home	Ini	formation Co	onfidentiality	[17	7-1454-13.1]
13.1.(b)(5)	Provide procedu	trainir ıres ar	g to all emplo d client privac	yees, and for homes, y rights.		e home, on their confidentiality policies and
Comment:	-fid-stickt	. 41	:A	00#2		
13.1.b.5 No co		•	<b>~</b> .		AT THE THE THE THE THE THE	and the distriction of the second of the sec
Foster Family	/ Home	Pe	rsonnel and	l Staffing	[17	7-1454-41]
41.(b)(5)				ortation through posse proved by the departm		Hawaii driver's license and access to an insured
Comment:		_				
TV 7 10 W				with minimum cove		sent for CG#3.
Foster Family	Home	Ph	ysical Envi	ronment	[17	7-1454-48]
48.(a)(4)	Wheelc	hair ac	cessibility to s	leeping rooms, bathro	oms, common a	reas and exits, as appropriate;
48.(c)(3)  Comment:	The ho	me sh	all be maintain	ed in a clean, well ver	ntilated, adequate	ely lighted, and safe manner.
48.a.4 Dining r	room table	is not	wheelchair a	accessible for clients	s to eat at.	
48.c.3 Bathroo	om light swi indow scree	tch ha	s heavy dirt one client ro	and grim.		ng large gaps for insects, including
	Comp	liance	Manager	<del></del>	<del></del>	Date
		(1				11 100/10
	Prima	r <b>yyt</b> a	re Giver	<del></del>		Date
Page 1 of 1		_				11/30/2016 16:05 PI

## Written Plan of Correction

## December 1, 2016

13.1.b.5 The home went over the confidentiality training with CG#3 sign and dated on November 30, 2016. The home will make sure that all GG understands the confidentiality training and will keep a record in the personal record.

41.b.5 The home added CG#3 to vehicle insurance policy as a driver on November 30, 2016. The home will make sure all drivers have a drivers license and auto insurance with minimal coverage and will keep records in personal record.

48.a.4 The home replaced the dining table so it is now wheelchair accessible. The home will make sure that wheelchair accessibility is available to all areas of the house including sleeping rooms, bathroom, common areas and exits.

48.c.3 The home replaced the bathroom light switch and the 2 window screens on November 30, 2016. The home will make sure that all equipment are in good working order and will replace old or broken equipments. The home will perform good house cleaning 3 times a week to prevent dirt and grim from building up.

Signed:

Hazeline Taban

94-917 Kuhaulua St., B Waipahu, HI 96797